

## COMMERCE AND INSURANCE COMMISSION ON FIRE FIGHTING

500 James Robertson Parkway, Suite 630 Nashville, TN 37243 – 615-741-6780

## IN-SERVICE TRAINING VERIFICATION SHEET

**INSTRUCTIONS**: This form is to be signed by all fire service personnel receiving State Educational Incentive Bonus Pay certifying that he/she has received the required training prior to issuing the individual the Educational Incentive Check. This form is to be submitted to the Commission Office upon completion with a copy kept on file in the fire department for a period of three (3) years. This form may be signed by fire service personnel anytime after last training date and date of receiving Educational Incentive.

**FIRE SERVICE PERSONNEL**: By affixing your signature to this form, you hereby certify to the Commission that you received the required training in accordance with the Commission's Rules and Regulations and are eligible to receive the State Educational Incentive Bonus Pay for the calendar year indicated.

CALENDAR YEAR IN WHICH TRAINING WAS COMPLETED:		
Fire Personnel's Full Name (Printed)	Fire Personnel's SS # (last 4 digits)	Fire Personnel's Signature

DEPARTMENT NAME